

App # J. (A: Powerhouse/Service Area Washington Application for a Water Right

Fee Paid 10 Pate 7/1/98

Please follow the attached instructions to avoid unnecessary the layer

					EASTERN REGIONAL OFFICE		
Section 1	. APPLI	CANT - I	PERSON	, ORGAN	NIZATION, OR WATER SYSTER	M	
lame	Tames Col	len Seat	tle City	Light	Home Tel: ()		
				- 1	Work Tel: (<u>509</u>) 446 - <u>3</u>	083	
ity	Metaline	Falls Stat	e <u>wa</u> Zip	+499153	+ FAX: (<u>509</u>) <u>446</u> - <u>2</u>	2928	
107.53	. CONTA	Service and the Part of the Pa	RSON T	O CALL	ABOUT THE APPLICATION		
ame	Jennie G	oldberg,	Seattle C	ity Light	Home Tel: (
ailing Add	ress700_	- 5th Ave	nue, Suit	e 3100	Work Tel: (206) 684 - 3	3167	
ity	Seattle	Sta	te WA Zip	0+4 <u>9810</u>	4 + 5031 FAX: (206) 386 - 4	4589	
elationship	to applicant	Water Q	uality Ma	nager			
Section 3	3. STATE	MENT	DEINTE	NIT -			
					Charles and the second		
					(\(\text{\text{gallons per n}}\) I ground water source (check only one) for the		
f	domestic	supply an	d powerho	use cooli	ng ATTACH	I A "LEGAL"	
ufficient.	ON OF TH	OUS MI	OF USE. (S	ee instruction	ons.) NOTE: A tax parcel number or a plat notes and Power House	cooling	
stimate a m	aximum ann	ual quantity	to be used in	n acre-foot p	per year:		
Check	if the water	use is propo	seed for a sh	ort term pro	ject. Indicate the period of time that the water	r will be needed	
_ Cheer	in the water	use is prope	oscu for a sin	ort-term pro	eet. Indicate the period of time that the water	i will be needed	
	From	//	to/_				
		ERRENAL CHERTERS AND A	sina katagaranaha		Andre para la constitución de ser en el constitución de la constitución de la constitución de la constitución	1 109	
Section 4	4. WATE	R SOUR	CE			on all breadly	
If SURFA	CE WATER				If GROUNDWATER	ماس س	
Apply 3 deat appeal from 5, 1st	water source	THE PERSON LAND MANY OF RESIDENCE	ate if stream	n enring	A permit is desired for 28	well(s).	
lake, etc. I	f unnamed, stream," et	write "unn			A permit is desired for	well(s).	
	f diversions						
Source flows into (name of body of water):					Size & depth of well(s):		
Source nows into (name of body of water).					10" 50' - 400'		
					10 30 - 400		
LOCATIO	A 10 10 10 10 10 10 10 10 10 10 10 10 10	-		2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
Enter the section co		and east-w	est distance	es in feet fr	om the point of diversion or withdrawal to h & 2712' West of SE corner of Se	o the nearest	
section co	Pro	posed Wel	L1 #2: 22	270' Nort	h & 2537' West of the SE corner of	f Section 3	
	Pro	posed Wel	L1 #3: 36	664' Nort	h & 2507' West of the SE corner o	f Section 3	
					If location of source is		
1/4 of	1/4 of	Section	Township	Range (E/W		Constitution of the contract of	
					Lot Block	Subdivision	
NE NW	SW SE	3	40N 40N	43E 43E	Pend Oreille	· · · · · · · · · · · · · · · · · · ·	
SW	NE	. 3	40N	43E	Pend Oreille		
For Ecology I	Jse Date R	eceived:	7/1/98	Prior	ity Date: 4/1/98		
	Not Exempt		nse#		Dept. Of Health #		
	d As Complete	CIPA	20	&K i	Date Returned By	WRIA: 62	
. 4	F 4 2 2 4 4 5 1 7 5 5 5				The second secon		
		W				And the same of th	

Appl. No.:

- on part of largeprojet - will return one SEPA to cover all. Ans #1.

56	ction 5. GENERAL WATER SYSTEM INFORMATION
A.	Name of system, if named: A- Powerhouse/Service Area Wells
В.	Briefly describe your proposed water system. (See instructions.)
unch system and in The : Powe 2" - 6	wells for the Powerhouse shall provide domestic and industrial water for the facility restrooms and proom, air condition units, compressor units, shaft seals, and other hydroelectric equipment. The sem shall have 6" to 10" stainless steel submersible pumps with up to 75 HP, constructed housing unit, new 4"-6" main through the Service Area, picnic area, and the Powerhouse utility tunnel entrance, system shall branch into domestic and industrial lines and connect to existing piping inside the erhouse. The wells for the Service Area shall have a pump with constructed housing unit and a new 6" mainline for domestic use to existing and new lateral connections to approximately eight building ctures.
C.	Do you already have any water rights or claims associated with this property or system? PROVIDE DOCUMENTATION. 3 for power 1 for domestic supply
281835120010	ection 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INFORMATION Completed for all domestic/public supply uses.)
A.	Number of "connections" requested: 10 Type of connection Offices (Homes, Apartment, Recreational, etc.)
В.	Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.
Cor	mplete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved version of your plan.
TOTAL COOK	ection 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION Completed for all irrigation and agriculture uses.)
A.	Total number of acres to be irrigated:
B.	List total number of acres for other specified agricultural uses:
	Use Acres
	Use Acres
	Use Acres
C.	Total number of acres to be covered by this application:
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977) Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).
	 Is the combined acreage greater than 2000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no.:
E.	Farm uses: Stockwater - Total # of animals Animal Type (If dairy cattle, see below) Dairy - # Milking # Non-milking

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APPLICATION

Section 8. WATER STORAGE		
Will you be using a dam, dike, or other structure to retain or store water?	· □ YES	ON K
NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet o point, and some portion of the storage will be above grade, you must also apply for a reservoir perm reservoir permit application from the Department of Ecology.	r more at the it. You can g	e deepesi et a
Section 9. DRIVING DIRECTIONS		
Provide detailed driving instructions to the project site.		
See Drawing C-1 location map. On Highway 31 in Metaline turn Dam Road. Drive approximately 9.5 miles and take the right for Project. Allow approximately 2½ to 3 hours from Spokane.	left on Bo k at the l	oundary Boundar
Section 10. REQUIRED MAP		ur,
A. Attach a map of the project. (See instructions.)		
See Drawing C-1.		
Section 11. PROPERTY OWNERSHIP		
A. Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provide the name(s) and address(of the owner(s):	es) YES	□NO
Approximately 50% (primarily the tailrace recreation area and powerhouse see Drawin by the United States Forest Service, Colville National Forest. The entire area is within SERC licensed boundary (FERC Project No. 2144). Fred Gonzalez, District Ranger, St. Ranger District, 12641 Sullivan Lake Road, Metaline Falls, WA, 99153, (509) 446-7500	Seattle city I ullivan Lake	_ight's
B. Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:	⊠kYES	□NO
I certify that the information above is true and accurate to the best of my knowledge. I underst to process my application, I grant staff from the Department of Ecology access to the site for in monitoring purposes. Even though I may have been assisted in the preparation of the above ap employees of the Department of Ecology, all responsibility for the accuracy of the information	spection and	d the
Applicant (or authorized representative) DEPUTY SUPERINTENDENT- GENERATION PLANT SEATTLE CITY LIGHT.		
Landowner for place of use (if same as applicant, write "same") Date		
SEPA IS NOT EXEMPT: LEAD AGENCY 4 1/9199 Completed Checklist Received Lead Agency Determination of Nonsignificance Issued Determination of Significance Issued DRAFT EIS ISSUED THIS APPLICATION APPLICATION		
FINAL EIS ISSUED		

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

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and a constraint of the same		ion of Significa		
DRAFT EIS	ISSUEL		1	arada i
	ISSUED			

We are returning your application for the following re	ason(s):	contact products and an experience of the second
Examination fee was not enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s)incomplete	is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:		
Please provide the additional information requested a	above and return you	r application by

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To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

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